"Inbound Shipment Clearing Form"

Submit data for one shipment at a time.

Ó **Indicates required fields**

Ó **Indicates requested fields**

Ó **Local Agent:**	
Ó **Clearing Rep:**	
Ó **Agent's Email Address**	
Ó **Contact Telephone Number**	
Ó **Bill of Lading Number**	
Ó **Member Last Name:**	
Ó **Member First Name:**	
Ó **Split Shipment**	
Ó **NTS Release:**	

Ó **Members Rank/Grade:**	
Ó **Last 4 of SSAN:**	
Ó **Carrier SCAC:**	
Ó **RDD:**	
Ó **Gross Weight:**	
Ó **Net Weight:**	
Ó **Shipment Code:**	
Ó **Origin State/Country:**	
Ó **Date Offered for Delivery:**	

Comments: